This form must be used by the district to obtain information from private/nonpublic/schools. Private/nonpublic schools must return this form to the local district.

## 2009-10 Opportunity to Participate in Federally Funded Programs by Private/Nonpublic Schools

	Return form to Local School District						OPI USE		
This section to be completed by  LOCAL district.  Due date for return to public school district:				-			Check of		
Name of PUBLIC SCHOOL DISTRICT within which County K-12 the private/nonpublic school is located.					County		☐ Elem ☐ HS ☐ K-12		
This section to be completed by official representing the PRIVATE/NONPUBLIC school:									
Name of PRIVATE/NONPUBLIC SCHOOL				☐ Private School ☐ Home School			LE:_	OPI USE LE: CO:	
Address									
City/State/ZIP				Telephone No.					
For the federal programs for which this district receives funding, or may receive funding, please check each federal program in which this private/nonpublic school wishes to participate in school year 2009-10. Some of the listed programs are competitive or may have limits on eligible districts.									
ESEA Title I, Part A—Improving the Ac Achievement of the Disadvantaged	ademic (T I A)	Yes	No 		A Title IV, Part B—21st Cer ning Centers		· IV B)	Yes	No
ESEA Title I, Part B, Subpart 1—Readi Predecessor Program, Reading Excell				Lear	n & Serve	(L	.S)		
ESEA Title I, Part B, Subpart 3— Even Start Family Literacy	(T I B 3)				ool Nutrition Programs cial Education IDEA, Part	•	SF) SE B)		
ESEA Title I, Part C— Migrant Education Program	(T I C)			Spec	cial Education (IDEA)Pres d must be age 5)	chool	SE P)		
ESEA Title II, Part A—Improving Teach	er Quality(T II A	)		Carl	Perkins Vocational Educa	ation (\	/o Ed)		
ESEA Title II, Part D—Enhancing Education Through Technology (T II D)				Carri Civins Vocational Education (			, o _a,		
ESEA Title III, Part A—English Langua Proficient and Immigrant Students		or Limited	English						
ESEA Title IV, Part A—Safe & Drug-Freand Communities	ee Schools (T IV A)								
All Private/Nonpublic School Officials, please check the appropriate boxes below:  1. This private/nonpublic school does not wish to participate in any of the above listed programs.  2. This private/nonpublic school wishes to participate in the programs checked above. I assure the above public school district that this school will comply with provisions of each federal program in which it participates.  3. This nonpublic school has a student(s) who has been identified by the public school as a student with disabilities under the Individuals with Disabilities Education Act (IDEA). Yes No  This private/nonpublic school received the required consultation in a meaningful and timely manner with regard to special education and related services.  Yes No If the district receives Title I, Part A funds, please check "Yes" or "No" for consultation received.  4. This private/nonpublic school received the required consultation in a meaningful and timely manner with regard to services from Title I, Part A, if the district receives those funds. Yes No									
Responsible Private/Nonpublic School Official (Must be signed by Private/Nonpublic School Official)									
Printed or Typed Name					Signature				
Title					Date				

